## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

11)	bill	7601	13
	UY	001	

									· <u> </u>	<del>-</del>	· · ·										
CLAIMS AS FILED - PART I (Column 1) (Column 2)			mn 2)		SMALL ENTITY TYPE			OTHER SMALL													
TOTAL CLAIMS		_ 1/			r der ook		}	RATE	FEE	1	RATE	FEE									
FO	R		NUMBER F	FILED	NUMB	ER EXTRA		BASIC FEE	375.00	OR		750.00									
то	TAL CHARGEA	BLE CLAIMS	min	minus 20=		*		X\$ 9=		OR	X\$18=	<u></u>									
IND	EPENDENT CL	AIMS	) mii	) minus 3 =		* Ø		X42=		OR	X84=										
MULTIPLE DEPENDENT CLAIM PRESENT			RESENT		Γ			+140=		OR	+280=	1									
* If the difference in column 1 is less than zero, enter "0" in column 2						ļ	TOTAL		OR	TOTAL	70										
CLAIMS AS AMENDED - PART II							, '	.,	4	OTHER											
		(Column 1)		(Colum		(Column 3)	1 -	SMALL E		OR	SMALL										
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
ND	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=										
AME	Independent	*	Minus	***	.01.4	=		X42=		OR	X84=										
	FIRST PRESE	NTATION OF M	OLITE DE	ENUEN	CLAIM		۱ }	+140=		OR	+280=										
							1	TOTAL			TOTAL										
(Oalumn 4)								ADDIT. FEE	<u> </u>	1,,,	ADDIT. FEE										
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 -	-	A5-	, ,											
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=										
AME	Independent	* ENTATION OF MI	Minus	***	. CI A14.	=		X42=		OR	X84=										
<u> </u>	I INOI PHESE	NIATION OF M	OLITE DE	ENDEN	CLAIM		J	+140=		OR	+280=										
							l A	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE										
		(Column 1)		(Colur	mn 2)	(Column 3)		<b></b> .			. <b></b>										
<u>,                                     </u>		CLAIMS		HIGH	HEST		] ,		ADDI-	1		ADDI-									
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE									
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	<u> </u>									
ME	Independent	*	Minus	***		=	]	X42=		1	X84=										
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		1	//		OR		<del> </del>									
* 1	If the entry in col-	mn 1 is less than 4	he entry in col-	imp ? ····i	> "∩" in	lump 3		+140=		OR	+280=										
**	If the "Highest Nu	ımn 1 is less than tl ımber Previously P umber Previously P	aid For" IN THI	IS SPACE i	is less tha	an 20, enter <b>"</b> 20."	٠,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE										
							er foi	and in the app	propriate box	x in co	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										